

Notice of Allowability

Application No.

09/539,218

Examiner

Vanel Frenel

Applicant(s)

BEINAT ET AL.

Art Unit

3627

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address--

All claims being allowable, PROSECUTION ON THE MERITS IS (OR REMAINS) CLOSED in this application. If not included herewith (or previously mailed), a Notice of Allowance (PTOL-85) or other appropriate communication will be mailed in due course. **THIS NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIGHTS.** This application is subject to withdrawal from issue at the initiative of the Office or upon petition by the applicant. See 37 CFR 1.313 and MPEP 1308.

1. ☒ This communication is responsive to 5/29/07. Amendment
2. ☒ The allowed claim(s) is/are 1,3-16,18-31,33-69 and 71-87.
3. ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some* c) ☐ None of the:
1. ☐ Certified copies of the priority documents have been received.
2. ☐ Certified copies of the priority documents have been received in Application No. _____.
3. ☐ Copies of the certified copies of the priority documents have been received in this national stage application from the International Bureau (PCT Rule 17.2(a)).

* Certified copies not received: _____.

Applicant has THREE MONTHS FROM THE "MAILING DATE" of this communication to file a reply complying with the requirements noted below. Failure to timely comply will result in ABANDONMENT of this application.
THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.

4. ☐ A SUBSTITUTE OATH OR DECLARATION must be submitted. Note the attached EXAMINER'S AMENDMENT or NOTICE OF INFORMAL PATENT APPLICATION (PTO-152) which gives reason(s) why the oath or declaration is deficient.
5. ☐ CORRECTED DRAWINGS (as "replacement sheets") must be submitted.
- (a) ☐ including changes required by the Notice of Draftsperson's Patent Drawing Review (PTO-948) attached
- 1) ☐ hereto or 2) ☐ to Paper No./Mail Date _____.
- (b) ☐ including changes required by the attached Examiner's Amendment / Comment or in the Office action of Paper No./Mail Date _____.
- Identifying indicia such as the application number (see 37 CFR 1.84(c)) should be written on the drawings in the front (not the back) of each sheet. Replacement sheet(s) should be labeled as such in the header according to 37 CFR 1.121(d).
6. ☐ DEPOSIT OF and/or INFORMATION about the deposit of BIOLOGICAL MATERIAL must be submitted. Note the attached Examiner's comment regarding REQUIREMENT FOR THE DEPOSIT OF BIOLOGICAL MATERIAL.

Attachment(s)

- | | |
|--|--|
| 1. <input type="checkbox"/> Notice of References Cited (PTO-892) | 5. <input type="checkbox"/> Notice of Informal Patent Application |
| 2. <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 6. <input type="checkbox"/> Interview Summary (PTO-413),
Paper No./Mail Date _____. |
| 3. <input type="checkbox"/> Information Disclosure Statements (PTO/SB/08),
Paper No./Mail Date _____ | 7. <input checked="" type="checkbox"/> Examiner's Amendment/Comment |
| 4. <input type="checkbox"/> Examiner's Comment Regarding Requirement for Deposit
of Biological Material | 8. <input checked="" type="checkbox"/> Examiner's Statement of Reasons for Allowance |
| | 9. <input type="checkbox"/> Other _____. |

DETAILED ACTION

Notice to Applicant

1. This communication is in response filed on 5/29/07. Claims 1, 16, 31, 69, 77, 78 and 87 have been amended. Claims ^{1, 3-16}~~4-3, 16~~, 18-31, 33-69 and 71-87 are pending.

Allowable Subject Matter

- T.Z.*
9/17/07
2. Claims ^{1, 3-16}~~1-3, 16~~, 18-31, 33-69 and 71-87 are allowable. The following is an examiner's statement of reasons for allowance.

Independent claims 1 and 16 are directed to "inputting into a computer a plurality of profiles relating predetermined transient medical conditions to human body parts, each said profile estimating a time progression of a dysfunction level or a capacity of at least one said body part from a time of injury over a specific progressive time scale into the future, due to at least one said condition; identifying one or more said predetermined transient medical conditions that currently affect said person; selecting a said profile corresponding to each said transient medical condition; relating said selected profile's time dimension to an occurrence of its said transient medical condition; and generating and outputting on an output device an assessment of an impact of said medical conditions on said person, wherein said assessment is based on said profiles related to said medical conditions".

The prior art of record, De Tore et al (4,975,840) discloses method and apparatus for evaluating a potentially insurable risk.

Seare et al (6,223,164) discloses method and system for generating statistically-based medical provider utilization profiles.

Hammond et al (5,613,072) discloses system for funding future workers compensation losses.

Dormon et al (4,839,822) discloses computer system and method for suggesting treatments for physical trauma.

Joao (6,283,761) discloses apparatus and method for processing and/or for providing healthcare information and /or healthcare-related information.

However, none of the prior art of record discloses above nor fairly suggests "inputting into a computer a plurality of profiles relating predetermined transient medical conditions to human body parts, each said profile estimating a time progression of a dysfunction level or a capacity of at least one said body part from a time of injury over a specific progressive time scale into the future, due to at least one said condition; identifying one or more said predetermined transient medical conditions that currently affect said person; selecting a said profile corresponding to each said transient medical condition; relating said selected profile's time dimension to an occurrence of its said transient medical condition; and generating and outputting on an output device an assessment of an impact of said medical conditions on said person, wherein said assessment is based on said profiles related to said medical conditions".

Independent claim 31 is directed to "inputting into a computer model of a human body, said model including multi-level hierarchy of body parts that, in combination with each other, form the human body; inputting into a computer, for each transient medical

condition of a plurality of predetermined transient medical conditions, a severity value that estimates a time progression of a dysfunction level produced by said transient medical condition on at least one said body part from a time of injury over a specific progressive time scale into the future; identifying one or more said predetermined transient medical conditions that currently affect said person; combining said severity values for said transient medical conditions identified at step © to a combined severity value; and generating and outputting on an output device an assessment of an impact of said medical conditions on said person, wherein said assessment is based on said combined severity value.

However, none of the prior art of record discloses above nor fairly suggests "inputting into a computer model of a human body, said model including multi-level hierarchy of body parts that, in combination with each other, form the human body; inputting into a computer, for each transient medical condition of a plurality of predetermined transient medical conditions, a severity value that estimates a time progression of a dysfunction level produced by said transient medical condition on at least one said body part from a time of injury over a specific progressive time scale into the future; identifying one or more said predetermined transient medical conditions that currently affect said person; combining said severity values for said transient medical conditions identified at step © to a combined severity value; and generating and outputting on an output device an assessment of an impact of said medical conditions on said person, wherein said assessment is based on said combined severity value".

Independent claim 69 is directed to “inputting into a computer model of a human body, said model including multi-level hierarchy of body parts that, in combination with each other, form the human body, wherein said human body parts are classified into a multi-level hierarchy, each said body part in each of said hierarchy below a highest level of said hierarchy being a component body part of a composite body part in a higher level in said hierarchy; inputting into a computer, for each transient medical condition of a plurality of predetermined transient medical conditions, a severity value that estimates a time progression of a dysfunction level produced by said transient medical condition on at least one said body part; identifying one or more said predetermined transient medical conditions that currently affect said person; for each said body part having multiple said transient medical conditions identified at step ©, combining said severity values corresponding to said identified transient medical conditions to a total severity value for said body part based on a time at which said transient medical conditions to which said severity values correspond occurred; for each said composite body part up to a composite body part corresponding to the human body as a whole, combining said severity value of said component part of said composite body part up to a composite body part severity value for said composite body part based on a spatial relationship among said component body parts within the human body; where said person has spent time in a hospital as a patient, providing a severity value that describes an impact on said from a time of injury over a specific progressive time scale into the future”.

However, none of the prior art of record discloses above nor fairly suggests “inputting into a computer model of a human body, said model including multi-level

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hierarchy of body parts that, in combination with each other, form the human body, wherein said human body parts are classified into a multi-level hierarchy, each said body part in each of said hierarchy below a highest level of said hierarchy being a component body part of a composite body part in a higher level in said hierarchy; inputting into a computer, for each transient medical condition of a plurality of predetermined transient medical conditions, a severity value that estimates a time progression of a dysfunction level produced by said transient medical condition on at least one said body part; identifying one or more said predetermined transient medical conditions that currently affect said person; for each said body part having multiple said transient medical conditions identified at step ©, combining said severity values corresponding to said identified transient medical conditions to a total severity value for said body part based on a time at which said transient medical conditions to which said severity values correspond occurred; for each said composite body part up to a composite body part corresponding to the human body as a whole, combining said severity value of said component part of said composite body part up to a composite body part severity value for said composite body part based on a spatial relationship among said component body parts within the human body; where said person has spent time in a hospital as a patient, providing a severity value that describes an impact on said from a time of injury over a specific progressive time scale into the future".

Independent claim 77 is directed to "providing a plurality of profiles relating predetermined transient medical conditions to human body parts, each said profile estimating a time progression of a dysfunction level or a capacity of at least one said

body part from a time of injury over a specific progressive time scale into the future, due to at least one said condition; identifying one or more said predetermined transient medical conditions that currently affect said person, and selecting a said profile corresponding to each said transient medical condition, and relating said selected profile's time dimension to an occurrence of its said transient medical condition; where said person is subject to a common law compensation system, providing a model of a human body, said model including body parts that, in combination with each other, form the human body, providing, for each transient medical condition of a plurality of predetermined transient medical conditions, a severity value that estimates the dysfunction level produced by said transient medical condition on at least one said body part, identifying one or more said predetermined transient medical conditions that affect said person, and combining said severity values for said transient medical conditions identified at step (b, iii) to a combined severity value; and displaying an assessment of an impact of said transient medical condition identified at steps (a, ii) or (b, iii) on said person, wherein said assessment is based on said profiles related to said transient medical conditions at step (d) or on said combined severity value at step (b, iv), respectively.

However, none of the prior art of record discloses above nor fairly suggests "providing a plurality of profiles relating predetermined transient medical conditions to human body parts, each said profile estimating a time progression of a dysfunction level or a capacity of at least one said body part from a time of injury over a specific progressive time scale into the future, due to at least one said condition; identifying one

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or more said predetermined transient medical conditions that currently affect said person, and selecting a said profile corresponding to each said transient medical condition, and relating said selected profile's time dimension to an occurrence of its said transient medical condition; where said person is subject to a common law compensation system, providing a model of a human body, said model including body parts that, in combination with each other, form the human body, providing, for each transient medical condition of a plurality of predetermined transient medical conditions, a severity value that estimates the dysfunction level produced by said transient medical condition on at least one said body part, identifying one or more said predetermined transient medical conditions that affect said person, and combining said severity values for said transient medical conditions identified at step (b, iii) to a combined severity value; and displaying an assessment of an impact of said transient medical condition identified at steps (a, ii) or (b, iii) on said person, wherein said assessment is based on said profiles related to said transient medical conditions at step (d) or on said combined severity value at step (b, iv), respectively".

Independent claim 78 is directed to "for each said composite body part up to a composite part corresponding to the human body as a whole, combining said severity value of each said component body part of said composite body part up to a composite body part severity value for said composite body part based on a spatial relationship among said component body parts within the human body, where said person has spent time in a hospital as a patient, providing a severity value that describes an impact on said person for a time of injury in a progressive time line into the future, where said

person has received convalescent care, providing a severity value that describes an impact on said person of time spent by said person under convalescent care, where said person is predicted to suffer a transient medical condition in the future, providing a severity value that describes an impact on said person of said transient medical condition, where said person has suffered post traumatic stress syndrome, providing a severity value that describes an impact on said person of said post traumatic stress syndrome, where said person has suffered a temporary loss of ability to enjoy life, providing at least one severity value that describes an impact on said person said loss, where said person has suffered a permanent loss of ability to enjoy life, providing at least one severity value that describes an impact on said person of said loss, and where said person has suffered permanent dysfunction, providing a severity value that describes an impact on said person of said permanent dysfunction, and displaying an assessment of an impact of said transient medical conditions identified at steps (a, ii) or (b,iii) on said person, wherein said assessment is based on said latest date at step (a, viii) or on said whole body severity at step (b, v) and any said severities provided at steps (b, vi)- (b, xii), respectively”.

However, none of the prior art of record discloses above nor fairly suggests “for each said composite body part up to a composite part corresponding to the human body as a whole, combining said severity value of each said component body part of said composite body part up to a composite body part severity value for said composite body part based on a spatial relationship among said component body parts within the human body, where said person has spent time in a hospital as a patient, providing a severity

value that describes an impact on said person for a time of injury in a progressive time line into the future, where said person has received convalescent care, providing a severity value that describes an impact on said person of time spent by said person under convalescent care, where said person is predicted to suffer a transient medical condition in the future, providing a severity value that describes an impact on said person of said transient medical condition, where said person has suffered post traumatic stress syndrome, providing a severity value that describes an impact on said person of said post traumatic stress syndrome, where said person has suffered a temporary loss of ability to enjoy life, providing at least one severity value that describes an impact on said person said loss, where said person has suffered a permanent loss of ability to enjoy life, providing at least one severity value that describes an impact on said person of said loss, and where said person has suffered permanent dysfunction, providing a severity value that describes an impact on said person of said permanent dysfunction, and displaying an assessment of an impact of said transient medical conditions identified at steps (a, ii) or (b,iii) on said person, wherein said assessment is based on said latest date at step (a, viii) or on said whole body severity at step (b, v) and any said severities provided at steps (b, vi)- (b, xii), respectively".

Independent claim 87 is directed to "a plurality of medical condition profiles each medical condition profile associating a transient medical condition, one or more body parts affected by the transient medical condition and one or more temporally variable dysfunction values indicating a relative affect of the transient medical condition on each of the one or more body parts over a range of times into the future; receiving information

indicating one or more patient transient medical conditions affecting the medically impaired person; searching the one or more databases to identify medical condition profiles that associate transient medical conditions matching each of the one or more patient transient medical conditions received in step (b); for each medical condition profile identified in step (c); identifying the one or more body parts associated with the medical condition profiles; identifying the temporally variable dysfunction value associated with each of the one or more body parts associated with the medical condition profile; and using the model of (a, i) identify any body parts for which the one or more body parts of identified in (d, i) are a component; generating a first capacity level for each of the one or more body parts of identified in (d, i) based on the associated temporally variable dysfunction value identified in (d, ii); generating a second capacity level for any of the body parts identified in (d, iii) based on the capacity levels generated in (e) and the associated component functionality values; and generating and outputting an insurance compensation value based on the results of steps (e) and/or (f)".

However, none of the prior art of record discloses above nor fairly suggests a plurality of medical condition profiles each medical condition profile associating a transient medical condition, one or more body parts affected by the transient medical condition and one or more temporally variable dysfunction values indicating a relative affect of the transient medical condition on each of the one or more body parts over a range of times into the future; receiving information indicating one or more patient transient medical conditions affecting the medically impaired person; searching the one

or more databases to identify medical condition profiles that associate transient medical conditions matching each of the one or more patient transient medical conditions received in step (b); for each medical condition profile identified in step (c); identifying the one or more body parts associated with the medical condition profiles; identifying the temporally variable dysfunction value associated with each of the one or more body parts associated with the medical condition profile; and using the model of (a, i) identify any body parts for which the one or more body parts of identified in (d, i) are a component; generating a first capacity level for each of the one or more body parts of identified in (d, i) based on the associated temporally variable dysfunction value identified in (d, ii); generating a second capacity level for any of the body parts identified in (d, iii) based on the capacity levels generated in (e) and the associated component functionality values; and generating and outputting an insurance compensation value based on the results of steps (e) and/or (f)".

Claims 3-15, 18-30, 33-68, 71-76, 79-86 incorporate the features of claims 1, 16, 31, 69, 77, 78 and 87 through their dependencies, and are allowed for the same reasons given above.

A search has been conducted for a foreign prior art, however, none has been found.

EXAMINER'S AMENDMENT

3. An examiner's amendment to the record appears below. Should the changes and/or additions be unacceptable to applicant, an amendment may be filed as provided

by 37 CFR 1.312. To ensure consideration of such an amendment, it MUST be submitted no later than the payment of the issue fee.

Authorization for this examiner's amendment was given in a telephone interview with Attorney Richard Martinelli on August 1, 2007. During the interview, Attorney agrees to change the dependency of claim 68 to claim 31 and also to put a period at the end of the claim. He also stated that step (e) in claim 68 should change to step (f).

No further questions were discussed.

4. Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled "Comments on Statement of Reasons for Allowance."

Conclusion

5. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Vanel Frenel whose telephone number is 571-272-6769. The examiner can normally be reached on 6:30am-5:00pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Zeender Ryan Florian can be reached on 571-272-6790. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

V.F
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August 2, 2007

Andrew Joseph Rudy
Primary Examiner, AU 3627